



PATENT APPLICATION DECLARATION COMBINED WITH POWER OF ATTORNEY

Attorney's Docket No.: CE08636R

	Regular (Utility)		De	esign Applicat	ion	
As a below named inve	As a below named inventor, I hereby declare that:					
My residence, post office address and citizenship are as stated below next to my name.						
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:						
A METHOD AND APPARATUS FOR REDUCTION OF DISTORTION IN A TRANSMITTER						
the specification of wh	ich:					
is attached he		was filed on: as U.S. Serial N	0	4/19/2001 9/838,640		
		and was amend				
				(if	applicable)	
I hereby state that I specification, including						
I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with 37 CFR § 1.56(a).						
I hereby claim foreign priority benefits under 35 U.S.C. § 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate or 365(a) of any PCT international application which designated at least one country other than the United states of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed:						
Prior Foreign Application(s):						
no such application(s) filed such application(s) identified as follows:						
Application Number	Country		f Filing nth, year)	Priority (Claimed	
				Yes	No	
				Yes	No	

application(s) listed below:		e) of any United States provisional			
Provisional Application	on Serial No.:				
Provisional Application	on Filing Date:				
365(c) of any PCT internation below and, insofar as the subjection in the prior United States or I paragraph of 35 USC 112, I a	nal application designating the cet matter of each of the cet. International application cknowledge the duty to design the cet. \$1.56 which became	of any United States application(s), or ng the United States of America, listed laims of this application is not disclosed tion in the manner provided by the first isclose information which is material to available between the filing date of the iling date of this application.			
	no such application(s) filed				
	such application	n(s) identified as follows:			
U.S. Parent Application No. or PCT Parent No.	Filing Date (day, month, year)	Status (Patented, Pending, Abandoned)			
AS A NAMED INVENTOR, I HE OR AGENT(S) TO PROSECUTE PATENT AND TRADEMARK OF	THIS APPLICATION AND T	LOWING REGISTERED ATTORNEY(S) O TRANSACT ALL BUSINESS IN THE VITH:			
CUSTOMER NUMBER 22917					

Send correspondence to Customer Number 22917

Address all telephone calls to: STEVEN A. MAY at (847) 576-3635 Fax (847) 576-3750 I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 USC and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full flame of first-flamed of sole fivencol. EDWARD VINCENT LOOIS				
Inventor's signature	Elue V p	lei	Date	2-20-01
	CHARLES		IL	
(City		State or Fo	reign Country
Citizenship <u>USA</u>	Country			
Post Office Address	•		ANE	
		Street Address		
ST. CHARL	ES	IL		60175
City		State or Country		Zip Code
Full name of second-named joint inventor MICHAEL DAVID LEFFEL				
Inventor's signature	See Attacl	ned	Date	
Residence CR	YSTAL LAKE		肛	
City State or Foreign Country				
Citizenship <u>USA</u>	Country		<u>_</u>	
	Country			
Post Office Address 1601 AUTUMNCREST DRIVE				
Street Address				
CRYSTAL L	AKE	IL		60014
City		State or Country		Zip Code

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 USC and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of first-named or sole inventor EDWARD VINCENT LOUIS					
Inventor's signature	Elue V Le	Date	7-20-01		
Residence ST.	CHARLES	IL			
(City	State or Fo	oreign Country		
Citizenship USA					
	Country				
Post Office Address	7N793 NORTHERN	N DANCER LANE			
	Stre	et Address			
ST. CHARL	ES II	L	60175		
City	State	or Country	Zip Code		
Full name of second-named joint inventor MICHAEL DAVID LEFFEL					
Inventor's signature	Michael	David Loffel Date	8/2/2001		
Residence CR	YSTAL LAKE	IL.			
(City	State or Fo	oreign Country		
Citizenship USA					
	Country				
Post Office Address 1601 AUTUMNCREST DRIVE					
	Stre	et Address			
CRYSTAL L	AKE II		60014		
		_	00014		